



**INDIAN INSTITUTE OF SCIENCE
BANGALORE – 560 012**

REIMBURSEMENT REQUEST FOR ONLINE PURCHASES

| | | | | | |
|---|----------|-----------------------|-----|----------|--|
| Name of the Person requesting reimbursement : | Emp ID : | Department / Centre : | ECE | SAP No : | |
| | | | | Date : | |

To: The Financial Controller, IISc

Please reimburse the amount to,

- Name :
- Bank Account No. and Name of the bank :

Details of purchases (the value of each distinct item must be strictly less than 1,00,000)

| Sl. No. | Item Description | Qty. | Unit | Rate | GST | Amount |
|---------|------------------|------|------|------|-----|--------|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| Total: | | | | | | |

Total Amount (In words):

Debit Head:

- Goods received in satisfactory condition.
- Entered into the Department Equipment and Consumable Register (if applicable),
Number in the Register: _____
(Explicitly mention for all items entered into the register)
- Credit card statement / Proof of payment enclosed.
- Payment receipt from online vendor enclosed.
- Certified that the material procured online has not been returned for any reason.

Justification for online purchase:

**Signature of the
Person claiming**

**Signature of
Chair of the Department**